



MICHELLE BAASS
DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



GAVIN NEWSOM
GOVERNOR

February 23, 2022

To: Tribal Chairpersons, Designees of Indian Health Programs,
and Urban Indian Organizations

Subject: Notice of Proposed Change to the Medi-Cal Program

The purpose of this letter is to provide information regarding a proposed change to the Department of Health Care Services' (DHCS) Medi-Cal Program that will be submitted to the Centers for Medicare and Medicaid Services (CMS). DHCS is forwarding this information for your review and comment.

DHCS is required to seek advice from designees of Indian Health Programs and Urban Indian Organizations on Medi-Cal matters having a direct effect on Indians, Indian Health Programs or Urban Indian Organizations per the American Recovery and Reinvestment Act of 2009 (ARRA). DHCS must solicit the advice of designees prior to submission to CMS of any State Plan Amendment (SPA), waiver requests or modifications, or proposals for demonstration projects in the Medi-Cal program.

Please see the enclosed summary for a detailed description of this DHCS proposal.

QUESTIONS AND COMMENTS

Indian Health Programs and Urban Indian Organizations may also submit written comments or questions concerning this proposal within 30 days from the receipt of notice. Comments may be sent by email to Angeli.Lee@dhcs.ca.gov or by mail to the address below:

Contact Information

Department of Health Care Services
Director's Office
ATTN: Angeli Lee
MS 0000
P.O. Box 997413
Sacramento, CA 95899-7413

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and Urban Indian Organizations

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In addition to this notice, DHCS plans to cover this SPA in the next quarterly Medi-Cal Indian Health webinar. Please note that Indian Health Programs and Urban Indian Organizations may request a consultation on this proposal at any time as needed.

Sincerely,

Original signed by

Andrea Zubiarte, Acting Chief
Office of Tribal Affairs
Department of Health Care Services

Enclosure



Department of Health Care Services Tribal and Designees of Indian Health Programs Notice

PURPOSE

To seek necessary approvals to expand the definition of a health care “visit” at Federally Qualified Health Centers (FQHC), Rural Health Clinics (RHC), and Tribal Health Programs (THP).

BACKGROUND

DHCS proposes to permanently continue flexibilities in delivering FQHC, RHC, and THP services that were initiated during the COVID-19 Public Health Emergency (PHE). Specifically, after the PHE ends, the California State Plan will permanently include telehealth services, delivered via synchronous audio-visual interaction and telephonic (audio-only) interaction, in the definition of a “visit” at FQHCs, RHCs, and THPs.

DHCS expects that expanding the definition of a visit to include these telehealth services will extend the reach of providers into underserved communities, reduce physical and mental health disparities, enhance provider communication, and improve health outcomes and overall quality measures in vulnerable populations.

SUMMARY OF PROPOSED CHANGES

FQHC, RHC and THP visits, conducted via synchronous audio-visual interaction and telephonic (audio-only) interaction that meet all other requirements of a visit, will be reimbursable to these clinics.

The proposed effective date for SPA 22-0014 is April 1, 2022. SPA 22-0014 is subject to approval by CMS.

IMPACT TO TRIBAL HEALTH PROGRAMS

THPs will be able to receive Medi-Cal reimbursement for visits provided to beneficiaries by means of synchronous audio-visual interaction and telephonic (audio-only) interaction. DHCS anticipates this will help THPs provide services to beneficiaries, especially for patients that live in rural or remote communities or for those who may lack access to transportation. Consequently, the change in the definition of a visit may increase Medi-Cal reimbursements to THPs.

IMPACT TO FEDERALLY QUALIFIED HEALTH CENTERS

FQHCs will be able to receive Medi-Cal reimbursement for visits provided to beneficiaries by means of synchronous audio-visual interaction and telephonic (audio-only) interaction. This may increase reimbursements to FQHCs.

IMPACT TO INDIAN MEDI-CAL BENEFICIARIES

DHCS anticipates that Indian Medi-Cal beneficiaries will have increased access to health care services via telehealth, which is expected to improve health outcomes for those receiving these services.

RESPONSE DATE

Indian Health Programs and Urban Indian Organizations may also submit written comments or questions concerning this proposal within 30 days from the receipt of notice. Comments may be sent by email to Angeli.Lee@dhcs.ca.gov or by mail to the address below:

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